

## (1) PLACE OF BIRTH

County of Lee  
 Township of Bishopville  
 or  
 Inc. Town of .....  
 or  
 City of .....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
**26961**

Registration District No. 3000 Registered No. 42  
 (For use of Local Registrar)

(No. .... St. .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Dongless Samuel (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Male (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH March 22 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Dongless Samuel  
 (9) PRESENT POSTOFFICE OF FATHER Bishopville S.C.  
 (10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 21  
 (Years)  
 (12) BIRTHPLACE Lee Co.  
 (13) OCCUPATION Day Labor  
 (20) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Gunner Brown  
 (15) PRESENT POSTOFFICE OF MOTHER Bishopville S.C.  
 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 26  
 (Years)  
 (18) BIRTHPLACE Sumter Co.  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was ..... nt. .... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Amelia Price

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Bishopville S.C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug 22 1922

(28)

Mrs. N. J. Laney  
 Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.